

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
WACO DIVISION**

IN RE: **Kianna Marie McFayden**

Case No.

Debtor(s)

Chapter 13 Proceeding

☐ **AMENDED** ☐ **MODIFIED**
DEBTOR(S)' CHAPTER 13 PLAN
AND MOTIONS FOR VALUATION AND LIEN AVOIDANCE

Creditors are hereby notified that the following Plan may be amended at any time before confirmation. Any amendment may affect your status as a creditor. The Debtor's estimate of how much the Plan will pay, projected payments, and estimates of the allowed claims may also change. The following information advises creditors of the status of the case based on the information known at the time of its preparation. Any special concerns of a creditor may justify attendance at the Meeting of Creditors and such other action as may be appropriate under the circumstances. More detailed information is on file at the Office of the United States Bankruptcy Clerk in El Paso or Waco, Texas. Local Bankruptcy Rules and Standing Orders on procedures are available at the Clerk's Office and online at www.txwb.uscourts.gov.

Use of the singular word "Debtor" in this Plan includes the plural where appropriate.

Plan Summary

- A. The Debtor's Plan Payment will be Variable Payments, paid by ☒ Pay Order or ☐ Direct Pay for 60 months. The gross amount to be paid into the plan is \$120,000.00.
- B. The Plan proposes to pay all allowed priority claims in full, all secured claims to the extent of the value of the collateral or the amount of the claim, whichever amount is provided for in Section VI below, and approximately 100% of each unsecured allowed claim.
- THIS PLAN DOES NOT ALLOW CLAIMS. YOU MUST FILE A PROOF OF CLAIM BY THE APPLICABLE DEADLINE TO RECEIVE DISTRIBUTIONS UNDER ANY PLAN THAT MAY BE CONFIRMED. CREDITORS ARE REFERRED TO THE FEDERAL RULES OF BANKRUPTCY PROCEDURE, THE LOCAL BANKRUPTCY RULES FOR THE WESTERN DISTRICT OF TEXAS, AND THE APPLICABLE STANDING ORDER RELATING TO CHAPTER 13 CASE ADMINISTRATION FOR THIS DIVISION, FOR INFORMATION ON THESE AND OTHER DEADLINES.
- C. The value of the Debtor's non-exempt assets is \$5,627.62.
- D. If the payment of any debt is proposed to be paid directly by the Debtor outside the Plan, it is so noted in Section VI(1), set forth below.

Plan Provisions

I. Vesting of Estate Property

- ☐ Upon confirmation of the Plan, all property of the estate shall vest in the Debtor and shall not remain as property of the estate.
- ☒ Upon confirmation of the Plan, all property of the estate shall not vest in the Debtor, but shall remain as property of the estate.
- ☐ Other (describe):

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Continuation Sheet # 1

II. Pre-Confirmation Disbursements

In accordance with the applicable Standing Order Relating to Chapter 13 Case Administration, the Debtor requests and consents to disbursement by the Chapter 13 Trustee of payments prior to confirmation of the Plan to evidence the Debtor's good faith, promote successful completion of the case, and to provide adequate protection to secured creditors. The Debtor shall remit such payments to the Trustee commencing 15 days after the filing of the petition. Provided all conditions for disbursement are met and unless otherwise ordered by the Court, the Trustee shall begin disbursing to creditors as provided below, on the first regularly scheduled disbursement after 30 days after the the petition is filed. Payments under this paragraph will cease upon confirmation of the Plan.

Creditor/Collateral	Pre-Confirmation Payment Amount	Other Treatment Remarks
AAFES Refrigerator and Bedroom Suite	\$30.00	
Chrysler Capital 2014 Dodge Charger	\$100.00	
USAA Federal Savings Bank 2014 Dodge Durango	\$100.00	

III. Executory Contracts/Unexpired Leases/Contracts for Deed

Pursuant to 11 U.S.C. §1322(b)(7) of the Bankruptcy Code, the Debtor hereby elects to assume the following executory contracts, unexpired leases, and/or contracts for deed, if any:

Creditor Name	Description of Contract	Election	In Default
Aarons Rent to Own	Rent to Own Contract - 2 Bedroom Suites, Washer and Dryer - direct pay	Assumed	No
Sprint PCS	Cell Phone Contract - Direct Pay	Assumed	No

Pursuant to 11 U.S.C. §1322(b)(7) of the Bankruptcy Code, the Debtor hereby elects to reject the following executory contracts, unexpired leases, and/or contracts for deed, if any:

Creditor Name	Description of Contract	Election	In Default
(None)			

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Continuation Sheet # 3

VI. Specific Treatment for Payment of Allowed Claims

1. PAYMENTS TO BE MADE BY THE DEBTOR DIRECTLY TO CREDITORS, INCLUDING POST-PETITION DOMESTIC SUPPORT OBLIGATIONS

A. Debtor(s) shall pay the following creditors directly. Creditors with claims based on a post-petition domestic support obligation ("DSO"), including all governmental units to which a DSO claim has been assigned, or is owed, or that may otherwise recover a DSO claim, MUST be paid directly. Minors should be identified by their initials only. If no DSO creditor is listed, the Debtor represents he/she has no domestic support obligation.

All direct payments listed below shall be made in addition to the Plan payments made by Debtor to the Chapter 13 Trustee as herein set forth. Secured creditors who are paid directly shall retain their liens, and the Debtor(s) shall maintain insurance on the collateral, in accordance with the terms of the documents creating the lien on the collateral.

Creditor / Collateral, if any (including the name of each DSO creditor)	Remarks	Debt Amount	Payment Amount/Interval
Great Lakes Higher Education		\$3,400.00	
SWBC Mortgage Homestead		\$211,400.00	\$1,474.45

B. Debtor surrenders the following collateral. Confirmation of the Plan shall operate to lift the automatic stay provided by 11 U.S.C. § 362(a) with respect to the collateral listed, and any unsecured deficiency claim may be filed in accordance with the procedures set forth in the Standing Order Relating to Chapter 13 Case Administration for this Division.

Creditor/Collateral	Collateral to Be Surrendered
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2. PAYMENTS TO BE MADE BY TRUSTEE TO CREDITORS

A. Administrative Expenses

Administrative Expenses shall include the Trustee's commission and debtor's attorney's fees. The Trustee shall receive up to 10% of all sums received. No fees or expenses of counsel for the debtor(s) may be paid until the filing fee is paid in full, and any fees and expenses that are allowed in addition to the fees and expenses originally agreed to be paid, may be paid only after all prior allowed fees and expenses have been paid.

Creditor	Estimated Amount of Debt	Payment Method: before secured creditors, after secured creditors, or along with secured	Remarks
James O. Cure, Attorney at Law	\$2,700.00	Along With	

B. Priority Claims, Including Domestic Support Obligation Arrearage Claims

Creditor	Estimated Amount of Debt	Payment Method: before secured creditors, after secured creditors, or along with secured	Remarks
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Continuation Sheet # 4

C. Arrearage Claims

Creditor / Collateral	Estimated Claim	Estimated Value of Collateral	Monthly Payment or Method of Disbursement	Interest Rate	Anticipated Total to Pay	Other Treatment/Remarks
SWBC Mortgage Homestead	\$12,000.00	\$212,000.00	Pro-Rata	0%	\$12,000.00	

D. Cure Claims on Assumed Contracts, Leases, and Contracts for Deed

Creditor/Subject Property, if any	Estimated Amount of Cure Claim	Monthly Payment or Method of Disbursement	Remarks
--------------------------------------	-----------------------------------	--	---------

E. Secured Creditors

Secured creditors shall retain their liens on the collateral that is security for their claims until the earlier of the date the underlying debt, as determined under non-bankruptcy law, has been paid in full, or the date of discharge under 11 U.S.C. § 1328. Therefore, if the debtor's case is dismissed or converted without completing of all Plan payments, the liens shall be retained by the creditors to the extent recognized by applicable non-bankruptcy law.

Creditor/Collateral	Estimated Claim	Value of Collateral	Monthly Payment or Method of Disbursement	Interest Rate	Anticipated Total to Pay	Other Treatment/Remarks (specifically note if claim amount to be paid although greater than value of collateral)
AAFES Refrigerator and Bedroom Suite	\$3,100.00	\$2,000.00	Pro-Rata	4.25%	\$2,221.93	
Chrysler Capital 2014 Dodge Charger	\$33,400.00	\$24,300.00	Pro-Rata	4.25%	\$37,106.36	Pay claim amount
USAA Federal Savings Bank 2014 Dodge Durango	\$40,500.00	\$35,300.00	Pro-Rata	4.25%	\$44,994.26	Pay claim amount

F. General Unsecured Creditors (including claims from rejection of contracts, leases and contracts for deed).

Describe treatment for the class of general unsecured creditors.

General Unsecured Creditors will receive approximately 100% of their allowed claims.

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DEBTOR(S)' CHAPTER 13 PLAN
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Continuation Sheet # 5

Totals:

Administrative Claims	<u>\$2,700.00</u>
Priority Claims	<u>\$0.00</u>
Arrearage Claims	<u>\$12,000.00</u>
Cure Claims	<u>\$0.00</u>
Secured Claims	<u>\$75,900.00</u>
Unsecured Claims	<u>\$8,500.00</u>

VII. Supplemental Plan Provisions

The following are the Supplemental Plan Provisions:

Sale of Homestead Property:

The Debtors are the owners of real property described in Schedule A herein. This property is their homestead and is claimed as exempt herein. If there are no objections to this exemption, or to this provision, within the time for so doing, then the Debtors shall be authorized to sell the property without the necessity of a Court hearing. The proceeds of any such sale shall be applied to the costs of the sale, any outstanding liens against the property, any tax liens against the property and all remaining proceeds shall be paid to the Debtors as the proceeds of the sale of exempt property. The Debtors shall provide a copy of the closing statement to the Trustee within ten days of closing.

Property Taxes:

The Debtors are the owners of real property located in Bell County, Texas, which property is their homestead and is claimed as exempt herein. The Debtors' ad valorem taxes are included in their monthly mortgage payments. Any claim for 2015 ad valorem taxes shall be treated as a post-petition indebtedness and will be paid directly, outside the Debtors' plan.

ACCEPTANCE OF/REJECTION OF/OBJECTION TO THE PLAN

ACCEPTANCE OF/REJECTION OF/OBJECTION TO THE PLAN BY HOLDERS OF ALLOWED SECURED CLAIMS PROVIDED FOR BY THE PLAN

EACH HOLDER OF AN ALLOWED SECURED CLAIM PROVIDED FOR BY THE PLAN SHALL BE DEEMED TO HAVE ACCEPTED THE PLAN UNLESS SUCH HOLDER FILES A WRITTEN REJECTION OF THE PLAN NO LATER THAN 10 DAYS PRIOR TO THE CONFIRMATION HEARING DATE. IF THE HOLDER OF AN ALLOWED SECURED CLAIM FILES AN OBJECTION TO CONFIRMATION OF THE PLAN AND DOES NOT OTHERWISE REJECT THE PLAN, SAID HOLDER SHALL BE DEEMED TO HAVE ACCEPTED THE PLAN IN ALL RESPECTS EXCEPT THOSE SPECIFICALLY RAISED IN THE OBJECTION TO CONFIRMATION. ALL WRITTEN NOTICES OF REJECTION OF THE PLAN SHALL BE FILED AND SERVED IN THE SAME MANNER AS OBJECTIONS TO CONFIRMATION.

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DEBTOR(S)' CHAPTER 13 PLAN
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Continuation Sheet # 6

Provision Regarding Payment of Attorney Fees

The Trustee shall make distribution of the base attorney fees at the maximum amount permitted under the First Standing Order Relating to Chapter 13 Case Administration under BAPCPA in the El Paso and Waco Divisions of November 8, 2005, Paragraph 6(B), as amended January 23, 2007.

Creditor's Direct Communication with Debtors

Creditors whose claims are scheduled to be paid directly by the Debtor(s), including creditors with claims secured by real property or vehicles, are authorized to send monthly statements to the debtor(s). They are also authorized to communicate directly with the Debtor(s) in response to Debtor(s) questions about monthly payments, escrow accounts, account balances, increases in monthly payments and other routine customer service inquiries.

Affirmation of Value on Refrigerator and Bedroom Suite

By her signature below, the Debtor does hereby affirm as follows: that the Debtor is over the age of 18 and is qualified to make this statement; that the Debtor has an account with AAFES - Take it Home Today, which is a revolving charge account opened in 2009. That in January, 2014, the Debtor purchased a refrigerator for approximately \$2,000.00 and a bedroom suite for approximately \$2,000.00. The Debtor has possession of the refrigerator and bedroom suite and believes that their current market value is \$2,000.00 which is based on sales prices in local newspaper and internet advertisements and resale shops.

Respectfully submitted this date: 2/25/2015.

/s/ James O. Cure

James O. Cure
2584 Blue Meadow Drive
Temple, TX 76502
Phone: (254) 690-8839 / Fax: (254) 690-1237
(Attorney for Debtor)

/s/ Kianna Marie McFayden

Kianna Marie McFayden
3500 Breeder Lane
Killeen, TX 76549
(Debtor)

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
WACO DIVISION**

IN RE: **Kianna Marie McFayden**

CASE NO

*Debtor(s)*CHAPTER **13**

EXHIBIT "B" - VARIABLE PLAN PAYMENTS

PROPOSED PLAN OF REPAYMENT (VARIABLE PAYMENTS INTO THE PLAN)

<u>Month</u>	<u>Payment</u>	<u>Month</u>	<u>Payment</u>	<u>Month</u>	<u>Payment</u>
1	\$1,500.00	21	\$2,100.00	41	\$2,100.00
2	\$1,500.00	22	\$2,100.00	42	\$2,100.00
3	\$1,500.00	23	\$2,100.00	43	\$2,100.00
4	\$1,500.00	24	\$2,100.00	44	\$2,100.00
5	\$1,500.00	25	\$2,100.00	45	\$2,100.00
6	\$1,500.00	26	\$2,100.00	46	\$2,100.00
7	\$1,500.00	27	\$2,100.00	47	\$2,100.00
8	\$1,500.00	28	\$2,100.00	48	\$2,100.00
9	\$1,500.00	29	\$2,100.00	49	\$2,100.00
10	\$1,500.00	30	\$2,100.00	50	\$2,100.00
11	\$2,100.00	31	\$2,100.00	51	\$2,100.00
12	\$2,100.00	32	\$2,100.00	52	\$2,100.00
13	\$2,100.00	33	\$2,100.00	53	\$2,100.00
14	\$2,100.00	34	\$2,100.00	54	\$2,100.00
15	\$2,100.00	35	\$2,100.00	55	\$2,100.00
16	\$2,100.00	36	\$2,100.00	56	\$2,100.00
17	\$2,100.00	37	\$2,100.00	57	\$2,100.00
18	\$2,100.00	38	\$2,100.00	58	\$2,100.00
19	\$2,100.00	39	\$2,100.00	59	\$2,100.00
20	\$2,100.00	40	\$2,100.00	60	\$2,100.00

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
WACO DIVISION**

IN RE: Kianna Marie McFayden
Debtor

CASE NO.

Joint Debtor

CHAPTER 13

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify that on February 25, 2015, a copy of the attached Chapter 13 Plan, with any attachments, and Budget and Monthly Family Income were served on each party in interest listed below, by placing each copy in an envelope properly addressed, postage fully prepaid in compliance with Local Rule 9013 (g).

/s/ James O. Cure

James O. Cure
Bar ID:05252800
James O. Cure, Attorney at Law
2584 Blue Meadow Drive
Temple, TX 76502
(254) 690-8839

AAFES
xxxxxxxxxxxx5994
c/o Bass & Associates, P.C.
3936 E. Ft. Lowell, Ste. 200
Tucson, AZ 85712

Credit One Bank
xxxx-xxxx-xxxx-0593
P.O. Box 60500
City of Industry, CA 91716-0500

Ray Hendren, Trustee
3410 Far West Blvd., Ste. 200
Austin, TX 78731

AAFES
xxxxxxxxxxxx7551
c/o Bass & Associates, P.C.
3936 E. Ft. Lowell, Ste. 200
Tucson, AZ 85712

First Premier Bank
xxxx-xxxx-xxxx-1384
P. O. Box 5519
Sioux Falls, SD 57117-5519

Rushmore Service Center
xxxx-xxxx-xxxx-1384
P.O. Box 5507
Sioux Falls, SD 57117-5507

Armed Forces Loans
xxxxxxxx123B
6161 S. Rainbow Blvd., #100
Las Vegas, NV 89118

Great Lakes Higher Education
xxxxxx8242
P.O. Box 7860
Madison, WI 53707

SWBC Mortgage
xxxxxx9200
P.O. Box 986
Newark, NJ 07184-0986

Chrysler Capital
1010 West Mockingbird Lane, #100
Dallas, TX 75247

Kianna Marie McFayden
3500 Breeder Lane
Killeen, TX 76549

U. S. Attorney General/VA
Main Justice Bldg., Room 5111
10th Street & Consitution Ave, NW
Washington, DC 20530

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
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Debtor

CASE NO.

Joint Debtor

CHAPTER 13

CERTIFICATE OF SERVICE

(Continuation Sheet #1)

United States Attorney/VA
601 Northwest Loop 410, #600
San Antonio, TX 78216

USAA Federal Savings Bank
xxxxxx7196
10750 McDermott Freeway
San Antonio, TX 78288-0544

VA Regional Office
Office of the District Counsel (02)
1400 N. Valley Mills Drive
Waco, TX 76799

Fill in this information to identify your case:

Debtor 1	Kianna	Marie	McFayden
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	WESTERN DISTRICT OF TEXAS		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I**Schedule I: Your Income****12/13**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status**Debtor 1**

- ☒ Employed
☐ Not employed

Occupation**Soldier****Employer's name****DFAS - DGG- CL****Employer's address****Garnishment Operations**

Number Street

P.O. Box 998002**Debtor 2 or non-filing spouse**

- ☐ Employed
☐ Not employed

Number Street

Cleveland

City

OH

State

44199-800

Zip Code

City

State Zip Code

How long employed there? **12 years****Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$5,220.72	
3. Estimate and list monthly overtime pay.	+ \$0.00	
4. Calculate gross income. Add line 2 + line 3.	\$5,220.72	

Debtor 1 **Kianna** **Marie** **McFayden**¹⁷ Case number (if known) _____
 First Name Middle Name Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.		\$5,220.72	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$590.47	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	
5e. Insurance	5e.	\$0.00	
5f. Domestic support obligations	5f.	\$0.00	
5g. Union dues	5g.	\$0.00	
5h. Other deductions. Specify: <u>See continuation sheet</u>	5h. +	\$40.80	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$631.27	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,589.45	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	
8b. Interest and dividends	8b.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$1,099.00	
8d. Unemployment compensation	8d.	\$0.00	
8e. Social Security	8e.	\$0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	
8g. Pension or retirement income	8g.	\$0.00	
8h. Other monthly income. Specify: <u>See continuation sheet</u>	8h. +	\$1,130.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$2,229.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$6,818.45	+ = \$6,818.45
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____			
	11. +	\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies.	12.		\$6,818.45 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.	None.		
<input type="checkbox"/> Yes. Explain:			

Debtor 1 **Kianna** **Marie** **McFayden**¹⁷ Case number (if known) _____
 First Name Middle Name Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
5h. Other Payroll Deductions (details)		
<u>SGLI</u>	<u>\$29.00</u>	<u> </u>
<u>AFRH</u>	<u>\$0.50</u>	<u> </u>
<u>Tricare</u>	<u>\$11.30</u>	<u> </u>
Totals:	<u>\$40.80</u>	<u> </u>
 8h. Other Monthly Income (details)		
<u>Pro-Rated Tax Refunds</u>	<u>\$480.00</u>	<u> </u>
<u>Mother's contribution</u>	<u>\$650.00</u>	<u> </u>
Totals:	<u>\$1,130.00</u>	<u> </u>

Debtor 1 **Kianna** **Marie** **McFayden**¹⁷ Case number (if known) _____
 First Name Middle Name Last Name

Your expenses

5. Additional mortgage payments for your residence , such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	<u>\$225.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$130.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$75.00</u>
6d. Other. Specify: <u>Cell Phone</u>	6d.	<u>\$100.00</u>
7. Food and housekeeping supplies	7.	<u>\$800.00</u>
8. Childcare and children's education costs (See continuation sheet(s) for details)	8.	<u>\$530.00</u>
9. Clothing, laundry, and dry cleaning	9.	<u>\$165.10</u>
10. Personal care products and services	10.	<u>\$100.00</u>
11. Medical and dental expenses	11.	<u>\$25.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$300.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	<u>\$100.00</u>
14. Charitable contributions and religious donations	14.	_____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<u>\$243.00</u>
15d. Other insurance. Specify: _____	15d.	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	_____
17b. Car payments for Vehicle 2 Aarons - 10 months	17b.	<u>\$659.00</u>
17c. Other. Specify: _____	17c.	_____
17d. Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	_____
20b. Real estate taxes	20b.	_____
20c. Property, homeowner's, or renter's insurance	20c.	_____
20d. Maintenance, repair, and upkeep expenses	20d.	_____
20e. Homeowner's association or condominium dues	20e.	_____

Debtor 1 **Kianna** **Marie** **McFayden**¹⁷ Case number (if known) _____
 First Name Middle Name Last Name

21. Other. Specify: See continuation sheet	21. + <u>\$301.00</u>
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. <div style="border: 1px solid black; padding: 2px; display: inline-block;"><u>\$5,318.45</u></div>
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. <u>\$6,818.45</u>
23b. Copy your monthly expenses from line 22 above.	23b. - <u>\$5,318.45</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. <div style="border: 1px solid black; padding: 2px; display: inline-block;"><u>\$1,500.00</u></div>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

None.

Debtor 1 **Kianna** **Marie** **McFayden**¹⁷ Case number (if known) _____
First Name Middle Name Last Name

8. Childcare and children's education costs (details):

Child Care	\$480.00
School Expenses	\$50.00

Total:	\$530.00
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21. Other. Specify:

Cable	\$100.00
Pet Care	\$30.00
Alarm/Security	\$97.00
Internet	\$74.00

Total:	\$301.00
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